UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.			403010/AOYAMA	_	
Client Reference No.				d	
First Inventor Ta		tsuo HATTA	0		
	DIFFER	ĒΝ	TIAL DRIVE TYPE		
SEMICONDUCTOR OPTICAL					
Title MODULATOR					

10/805289

		Expi	ess Mail Label	No.	. ‡		
APPLICATION ELEMENTS		ADDRESS TO:		Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450			
 Utility Patent Application Transmittal Form Applicant claims small entity status. See 37 CFR 1.27. 		ACCOMPANYING APPLICATION PARTS					
		10. Applicant requests early publication.(include publication fee under 37 CFR 1.18(d))					
3. Specification (including claims and	11	. 🛛	e))				
4. Drawings [Total Sheets 6]	12	. 🗆		b) Staten	nent (when there is		
 5. Combined Declaration and Power of Attorney [Total Pages 3] a. Newly executed b. Copy from prior application [Note Box 6 below] i. Deletion of Inventor(s) Signed statement attached deleting inventor(s) 		. .	Information Di Form PTC Copies of patents and appl	rney lation Do isclosure D-1449 Referend ications)	cument (if applicable) Statement (IDS) Ces (except for U.S.		
named in the prior application Incorporation by Reference: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b is considered as part of the disclosure of the accompanying application and is hereby incorporated by reference.		. 🗆	Return Receip (Should be specif Claim of Prior Document(s) Request & Ce 122(b)(2)(B)(i equivalent att	pt Postcard fically itemized) rity & Certified Copy of Priority ertification Under 35 USC i) (Form PTO/SB/35 or its			
Application Data Sheet. See 37 CFR 20. Other:		Other:					
8. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)							
9. Nucleotide and/or Amino Acid Sequence Submission a.							
21. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below:							
☐ Continuation ☐ Divisional ☐ Continuation-in-part of prior application no. Prior application information: Examiner ; Group Art Unit:							

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APPLICATION FEES								
BASIC FEE								
CLAIMS	NUMBER FILED	NUMBER EXTRA RATE						
Total Claims	10 -20=	x \$18.00		\$				
Independent Claims 1 - 3=			x \$86.00 +\$290.00	\$				
Multiple Deper	\$							
		Total of above	calculations =	\$770.00				
	y small entity =	\$()						
Assignment fe	e if applicable		\$40.00					
	on fee if applicable		+ \$300.00	\$				
			TOTAL =	\$810.00				
22. Please charge my Deposit Account No. 12-1216 in the amount of \$810.00.								
23. 🗌 A check	23. A check in the amount of \$ is enclosed.							
 24. The Commissioner is hereby authorized to credit overpayments or charge any additional fees of the following types to Deposit Account No. 12-1216: a.								
extension of time as incorporating a request therefor, and the Commissioner is hereby specifically authorized to charge Deposit Account No. 12-1216 for any fee that may be due in connection with such a request for an extension of time.								
26. CORRESPONDENCE ADDRESS								
	23548	700 Thirteenth Street, N.W., Suite 300 Washington, D.C. 20005-3960 (202) 737-6770 (telephone)						
	·)							
Name	Jeffrey A. Wyand, Reg. No. 29,458							
Signature	Shep Herry							
Date Karch ray Juni								

Utility Transmittal (Revised 2/28/04)